



COMMONWEALTH of VIRGINIA

Department for the Aging

Jay W. DeBoer, J.D., Commissioner

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COMMONWEALTH of VIRGINIA
Department for the Aging
Jay W. DeBoer, J.D., Commissioner

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Marsha Mucha

DATE: January 4, 2005

SUBJECT: Commonwealth Council on Aging Meeting Minutes

Attached for your information are the minutes from the September 9, 2004 Commonwealth Council on Aging meeting.

If you have any questions or would like additional information, please let me know.

Commonwealth Council on Aging

Meeting Minutes

September 9, 2004

Virginia Department for the Aging Conference Room

Members Present: Betty Bowden
John W. Burton
Mary Lee Cantor
David Cash
Dr. Barbara Chrisley
Norah Knutsen
Judith Koziol
Dr. Dick Lindsay
Gwen Mullen
Theresa Ransone
Judi Reid
Shirley Rogers
Elvira Shaw
Lilyan Spero
Erica Wood

Ex-Officio Present: Diana Thorpe, *Department of Medical Assistance Services*

Members Absent: Helen Cockrell
Xavier Richardson
Barbara Taylor
Ella Brown Wright

Ex-Officio Absent: Terry Smith, *Department of Social Services*

Guests: See attached list.

Staff: Jay W. DeBoer, J.D., *Commissioner*
Tim Catherman, *Deputy Commissioner, Support Services*
Bill Peterson, *Deputy Commissioner, Programs*
Janet Riddick, *Director, Center for Elder Rights*
Robin Brannon, *Communications Director*
Jack Kotvas, *Assistant Attorney General*
Barbara Childers, *Student Intern*
Marsha Mucha, *Administrative Staff Assistant*

Meeting Called to Order

Mrs. Judi Reid, Chairman of the Commonwealth Council on Aging, called the meeting to order at 10:00 a.m. She welcomed everyone and asked members and guests to introduce themselves. The Honorable Anita Rimler, Secretary of the Commonwealth, swore in the new members of the Commonwealth Council on Aging.

The minutes of the June 17, 2004 meeting were reviewed and approved as submitted.

Commissioner's Report

Commissioner DeBoer reported that the Virginia Department for the Aging (VDA) office move was accomplished the first week of August. He further reported that VDA is now working on the September 30, 2004 close of the federal fiscal year and also in the beginning process of preparing VDA's state budget submission for 2005-2006.

Commissioner DeBoer reported that Secretary Woods convened the first meeting of her Aging Task Force in August. The focus of the Task Force is assisted living. He noted that Council members would hear more about assisted living and the ombudsman program during today's presentations by Ms. Stevens from the Department of Social Services (DSS) and Ms. Latimer, the State Long-Term Care Ombudsman.

Commissioner DeBoer updated Council members on the status of the Medicare Prescription Drug Discount Cards. He reported that the Center for Medicare and Medicaid Services (CMS) has selected Virginia's Insurance Counseling and Assistance Program (VICAP) to be one of the recipients of funding to provide additional outreach to Medicare beneficiaries concerning the Medicare Prescription Drug Discount Program.

Commissioner DeBoer announced that the first GrandDriver "Stay Safe and Mobile Expo" would be held on Thursday, September 23 from 10:00 am. until 2:00 p.m. at the ACCA Temple, 1712 Bellevue Avenue in Richmond. He explained that a host of state agencies, health care providers and other community partners would be at the Expo to provide information, screenings, and driver assessments for older drivers. He invited Council members to attend.

Commissioner DeBoer reported that Governor Warner, as Chairman of the Southern Governors' Association, has selected aging as his Chairman's Initiative. The Southern Governors' Association will be meeting in Richmond, September 12-14, 2004 at the Omni Hotel. The portion of the program concerning aging will begin on Sunday. Dr. Lindsay will give the keynote address on Sunday afternoon. Commissioner DeBoer encouraged all who could to attend.

In closing, Commissioner DeBoer recognized VDA staff member, Mrs. Jane Snead, for her hard work on all facets of VDA's office relocation.

Update on HJR 103

Mr. Ashley Colvin from the Joint Legislative Audit and Review Commission (JLARC) provided Council members with an update on HJR 103. For the benefit of new Council members, he provided background information on JLARC and on HJR 103, which charges JLARC with undertaking a two-year study of the impact that Virginia's aging population will have on the demand for and cost of state agency services, policies, and program management. The mandate also directs JLARC to focus on particular state agencies such as the Department of Medical Assistance Services (DMAS), the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS), and DSS, as well as some other state agencies, such as the Department of Corrections (DOC), the Department of Human Resource Management (DHRM) and the Virginia Retirement System (VRS).

JLARC staff will present an interim status report to the Commission in October. A question and answer period followed Mr. Colvin's presentation.

Presentation on Assisted Living Facilities

Ms. Carolynne Stevens from the Division of Licensing Programs at DSS presented on the topic "Assisted Living: An Industry Coping with Its History, Expectations, and Successes". In beginning her presentation, she noted that, just as no two human beings are alike, the same is true for assisted living facilities. She noted that the assisted living industry has both reached out to, and been pushed into, serving a wide population, with some of their adaptations having been successful and some not.

Ms. Stevens then provided a brief history of the assisted living industry. She noted that, in the future, some forces that may affect the industry include research/medical technology and health/social policy. Ms. Stevens explained that a real breakthrough in treating Alzheimer's disease would have a tremendous impact on the industry.

Several other points she noted are as follows:

- There is no common definition of assisted living or clientele. Clientele may include children, the elderly, and ill individuals with increasing severity/acuity levels, Alzheimer's patients and those with other progressive dementias, the mentally ill, substance abusers and aged/disabled ex-prison inmates.
- There is no standardized service model for the industry. The advantage of this is that it allows flexibility for the consumer; however, a drawback is that it reduces the consumer's ability to plan. Also, corporate accountability can be murky.
- Delayed entry into assisted living facilities and aging in place can lead to higher acuity levels, which can exacerbate staffing and training needs.
- Labor supply, quality, and competition issues can be made worse by such forces as demand for high-care, hands-on attention, low pay, lack of training, and high turnover of staff as well as changing demographics of both clientele and staff.

Ms. Stevens then briefly discussed the licensing function of DSS with regard to assisted living facilities. The focus of licensing is to reduce two kinds of risks: immediate risks to life, health and safety, and cumulative risks, which are the potential loss of capacities and functionalities because of environment (quality of care).

In closing, Ms. Stevens briefly discussed how regulations are developed. She mentioned that drafting regulations is an enormous task, as they have to be written to be both consistent and written broad enough to accommodate all of the assisted living facilities throughout the Commonwealth. Ms. Stevens explained that no regulation in the state of Virginia exists that has not been greatly scrutinized before it is ever made final and then implemented. There is always plenty of opportunity for public input into the regulatory process.

Presentation on the Long-Term Care Ombudsman Program

Ms. Joani Latimer, the State Long-Term Care Ombudsman, presented the basics of the Ombudsman Program. She explained that the mission of the Ombudsman Program is to serve as an advocate for persons who receive long-term care services. The Program is somewhat unique in the way it operates in that it is a resident-centered and resolution-oriented program.

Ms. Latimer explained that the Ombudsman Program has a national scope and was created under federal legislation as part of the Older Americans Act (OAA). She then presented historical information on the Ombudsman Program. In Virginia, the Ombudsman Program also includes community based care as well as nursing home and assisted living care. The Ombudsman Program in Virginia is contracted from VDA to the Virginia Association of Area Agencies on Aging (V4A).

Ms. Latimer reported the following three primary roles of the Ombudsman Program:

- consumer education;
- individual advocacy; and
- systemic advocacy

Ms. Latimer went on to explain that, in Virginia, the Ombudsman Program is a statewide program operating out of 22 area agencies on aging (AAAs). The program operates with a staff of 27 (of which only 10 are full-time positions) for 66,000 long-term care beds. The Institute of Medicine recommends a ratio of 1 full-time ombudsman for every 2,000 beds. She thanked Council members for their previous support of additional funding for the Ombudsman Program to expand the staff throughout the state.

Ms. Latimer reported that, from October 1, 2003 to September 9, 2004, the Ombudsman Office received 802 complaints. Of those, 218 were regarding assisted living facilities. She reported that there is a broad range of quality and sophistication in service delivery in assisted living and, at the lower end (as described in the recent Washington Post articles), there can be significant problems. A number of those problems relate to the challenge of staffing in these facilities, such as the minimal qualification levels of staff that give direct care, and administrators.

In closing, Ms. Latimer noted the Ombudsman Program would be working toward better education and empowerment of consumers, and requiring greater accountability for assisted living facility administrators.

A question and answer period with Ms. Stevens and Ms. Latimer followed their presentations.

Appointments to Standing Committees

Mrs. Reid announced committee assignments, seven each to the Legislative Committee and the Planning and Development Committee. Each committee will set a meeting date at the close of today's Council meeting.

Legislative Committee assignments were made as follows:

Erica Wood, Chairman	Mary Lee Cantor
Elvira Shaw	David Cash

J. W. Burton
Ella Brown Wright

Barbara Chrisley

Planning and Development Committee assignments were made as follows:

Judith Koziol, Chairman	Dick Lindsay
Norah Knutsen	Helen Cockrell
Betty Bowden	Shirley Rogers
Theresa Ransone	

Legislative Committee Report

Mrs. Erica Wood, Chairman of the Legislative Committee, distributed copies of last year's legislative platform and she spoke briefly about the success of the recommendation from last year for the aging study, which resulted in the passage of HJR 103. Mrs. Wood explained that, at the June 2004 Council meeting, the Council adopted the legislative platform for 2005. She then reviewed the Council's 2005 legislative platform.

Mrs. Wood stated that, as Chairman of the Legislative Committee, she would like the Council to have a voice on assisted living, which is currently not on the Council's 2005 legislative platform. This is an issue the Legislative Committee will address at its next meeting.

Planning and Development Committee Report

Mrs. Judith Koziol, Chairman of the Planning and Development Committee, reported that there have been many changes to her Committee. She explained the Committee would meet after the Council meeting to set a date for its next meeting. At the next meeting, the Committee could focus their attention on addressing one or two goals selected from the Council's Strategic Plan.

Ad Hoc Committee Report

Ms. Robin Brannon, VDA's Communications Director, reported in Mrs. Taylor's absence. Ms. Brannon distributed a one-page, two-sided sample of an idea for the Council's Annual Report. The report would be printed in full color, and then laminated. The Council's legislative recommendations would appear on one side and statistics supporting the recommendations would be placed on the other side.

After discussion and suggestions, Mrs. Reid noted that the Council's revised bylaws call for the Annual Report to be finished by October 31. Council members agreed to use the format as presented and they voted to give the responsibility for producing and making final decisions concerning the Annual Report to the Ad Hoc Committee.

Other Business

As a point of clarification, Mr. Jack Kotvas, Assistant Attorney General, explained that a 30-day notice must be given for Council committee meetings and the meetings must be open to the public. There is a general preclusion in the Freedom of Information Act (FOIA) that meetings may not be held telephonically. He explained that a quorum of a board or committee may meet

physically and those who could not attend could participate in the meeting telephonically. He noted that the same provision must be available to the public.

Dr. Peterson distributed flyers on the GrandDriver "Stay Safe and Mobile Expo" and the GrandDriver brochure. He also distributed the agenda for the Southern Governors' Association meeting this Sunday and Monday in Richmond.

Meeting Dates

The next meeting of the Commonwealth Council on Aging will be held Thursday, December 2, 2004 at 10:00 a.m. at the VDA offices. The Executive Committee and the Ad Hoc Committee will meet at 9:00 a.m. that morning.

The Virginia Center on Aging's Legislative Breakfast will be held Wednesday, January 26, 2005. The Council will plan to visit the legislators that morning and then meet at 11:00 a.m. at the VDA offices. VDA will provide van transportation to and from downtown.

The remainder of the 2005 meeting schedule will be decided at the December 2004 meeting. A Nominating Committee will be appointed at the January 26, 2005 meeting with elections in June 2005.

The following speaker topics were suggested for future meetings:

- Assisted living Medicaid waivers for people with Alzheimer's and dementia;
- Transportation;
- Long-term care personnel and direct service worker issues presentation;
- Gerontology presentation by Dr. Lindsay; and
- Plight of older citizens on finances/fraud.

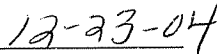
Public Comments

There were no public comments.

Adjournment

There being no further business the meeting was adjourned at 2:00 p.m.


Barbara Taylor, Secretary


Date

COMMONWEALTH of VIRGINIA
Department for the Aging
Jay W. DeBoer, J.D., Commissioner

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

AND: Nutrition Directors

FROM: Carol Cooper Driskill

DATE: January 4, 2005

SUBJECT: Healthy Virginians Catalog – Due January 15 – AAA Input Needed!

I had the pleasure of attending The Governor's Summit on Healthy Virginians in November. One of the objectives of the Healthy Virginians initiative is to produce a catalog of current and ongoing model programs in wellness ("best practices") that could be replicated across Virginia.

The draft document for aging is attached. I will submit revisions regarding home delivered and congregate meals. Even though the experts on the Healthy Virginians Catalog Committee researched a vast scope of programs and initiatives, best practices from only one Area Agency on Aging are included. I know that most of our AAAs have at least one initiative to submit.

It is my understanding that in order to focus most appropriately on relevant subject matter, the Catalog Committee established criteria for inclusion in the Catalog to identify quality programs with recognized outcomes:

- 1) The program or initiative relates to improving nutrition, increasing physical activity or preventing smoking
- 2) The program or initiative has been designated a National or Virginia Model Program

SUBJECT: Healthy Virginians Catalog – Due January 15 – AAA Input Needed!
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3) The program or initiative is ongoing and has been active for more than one year. Please complete the attached Healthy Virginians form with information about your wellness, nutrition, and physical activity initiatives and submit it to The Healthy Virginians Catalog Committee by **January 15, 2005**. The email address and fax number are on the form.

Thank you for your efforts to promote health and wellness for Virginians, and for sharing all of your best practices! Please contact me at Carol.Driskill@vda.virginia.gov or 804-662-9319 with any questions.



Please reply by January 15, 2005

NAME
of Wellness Initiative: _____

CONTACT Name: _____

Telephone: _____

Web Contact: _____

BRIEF DESCRIPTION:

Submitted By: _____

PLEASE FORWARD TO:

The Healthy Virginians Catalog Committee

Email: HealthyVirginians@governor.virginia.gov

FAX: 804-371-0154



HEALTHY AGING

Healthy aging is the development and maintenance of optimal physical, mental and social well-being and function in older adults. It is most likely to be achieved when physical environments and communities are safe, and support the adoption and maintenance by individuals of attitudes and behaviors known to promote health and well-being; and by the effective use of health services and community programs to prevent or minimize the impact of acute and chronic disease on function. (Healthy Aging Research Network)

As people age, most individuals remain healthy and active. Poor health and long periods of dependence and disability are the exception, not the rule. Good nutrition is extremely important from childhood through late adulthood. In Virginia, one out of every three older adults is over the age of 74. (The Virginia Dept. for the Aging, 1996) America's aging population is growing at a faster rate than any other U.S. population group. Strategies have been proven to help promote independence, prevent long-term disabilities, and chronic diseases among the aging. However, there are few model programs specifically designed for the aging population. → New info

Fast Facts

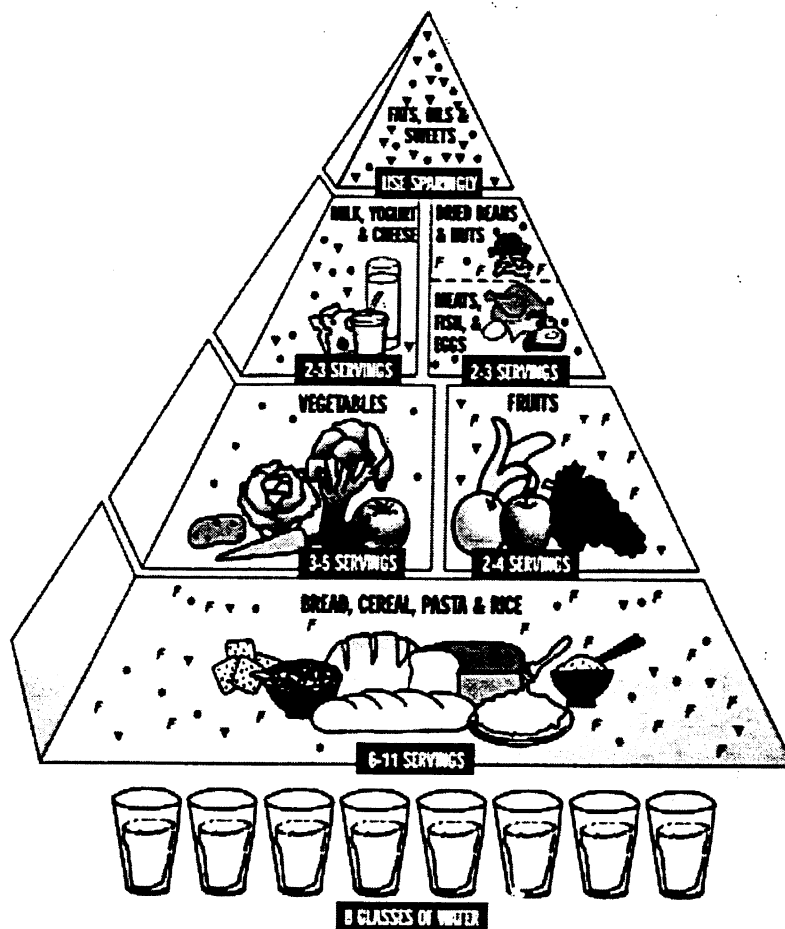
Nutrition

As you age, a balanced and varied eating pattern remains important, but your nutritional needs change. This is especially true if you take medications that may impact your appetite and vitamin and mineral needs. Also, the risks for nutrition-related diseases such as heart disease, the bone disease osteoporosis, and diabetes increase as you age. (Senior Connections, The Capitol Area Agency on Aging)
Dietary changes could reduce chronic disease deaths in the U.S. by 35% (www.HealthierUS.gov)

HEALTHY VIRGINIANS

The Food Guide Pyramid For Persons 50+

Persons aged 70+ may need calcium, vitamin D, or vitamin B-12 supplements.



(As We Age: Nutrition for Senior Adults - Virginia Cooperative Extension - Publication Number 348-020, posted August 2000)

DRAFT



Physical Activity

- Older adults, both male and female, can benefit from regular physical activity. CDC – *Physical Activity and Health – A Report of the Surgeon General*, 1999.
- Physical activity need not be strenuous to achieve health benefits.
- Older adults can obtain significant health benefits with a moderate amount of physical activity, preferably daily
 1. moderately intense activities (such as walking) or
 2. shorter sessions of more vigorous activities (such as fast walking or stair walking).
- 33.7% of adults 50 and older are sedentary, representing the most inactive segment of the adult population (CDC, 2002).
- Benefits of Physical Activity for the Elderly: (*Physical Activity and Health*, A Report of the Surgeon General, November 17, 1999)
 1. Helps maintain the ability to live independently and reduces the risk of falling and fracturing bones.
 2. Reduces the risk of dying from coronary heart disease and of developing high blood pressure, colon cancer, and diabetes
 3. Can help reduce blood pressure in some people with hypertension
 4. Helps people with chronic, disabling conditions improve their stamina and muscle strength.
 5. Reduces symptoms of anxiety and depression and fosters improvements in mood and feelings of well-being.
 6. Helps maintain healthy bones, muscles, and joints.
 7. Helps control joint swelling and pain associated with arthritis.
- Seven out of ten nondisabled persons 65 years of age and over participated in some form of exercise at least once in a recent 2-week period (Annual Report on Nation's Health Spotlights Elderly Americans, October 99).
- 98% of people 50 and older know that getting enough exercise is important to staying healthy (AARP Pilot Survey on Physical Activity 2001)

Tobacco Use

- Smoking is the most preventable cause of death in our society. People, who quit, regardless of age, live longer than those who continue to smoke (1990, U.S. Surgeon General, Benefits of Smoking Cessation).
- Quitting smoking substantially reduces the risk of lung, laryngeal, esophageal, oral, pancreatic, bladder and cervical cancers.

HEALTHY VIRGINIANS

- Quitting lowers the risk for other major diseases including coronary heart disease and cardiovascular disease.
- Older adults began smoking before its harmful effects were well understood. All of the major causes of death among the elderly are associated with smoking and second hand smoke. (American Lung Association) - www.lungusa.org
- Approximately half of all Americans who continue to smoke will die from their cigarette smoking addiction (American Cancer Society – Cancer Facts and Figures 2004).
- There is no safe level of exposure to secondhand smoke. Each year, thousands of adults die of lung cancer and heart disease as a result of breathing secondhand smoke.
- Smoking caused approximately \$157 billion in annual health related economic costs, including adult mortality-related productivity costs and adult medical expenditures (Centers for Disease Control and Prevention, 1995-1999).

Model Programs

Nutrition

American Cancer Society Guidelines for Eating Well and Being Active - Eat and exercise your way to better health. What you eat (or don't eat) and how active you are can influence your risk of developing cancer. Learn about the best ways to reduce your risk through simple lifestyle changes

☎ 1-800-ACS-2345

💻 <http://www.cancer.org>

American Heart Association – Distributes publications on diet, nutrition, weight reduction, and exercise to the public.

☎ 1-800-242-8721

💻 <http://www.americanheart.org>

Center For Nutrition Policy and Promotion - CNPP works to improve the health and well-being of Americans by developing and promoting dietary guidance that links scientific research to the nutrition needs of consumers. Center staff helps to define and coordinate nutrition education policy within USDA and to translate nutrition research into information and materials for consumers, policymakers, and professionals in health, education, industry, and media.

💻 <http://www.usda.gov/cnpp/>

HEALTHY VIRGINIANS

Congregate Nutrition Programs: Virginia Association of Area Agencies on Aging – State wide congregate meal programs for seniors.

☞ <http://www.vaaaa.org/>

△ Change to VDA contact
Expand description

Eastern Shore Diabetes Control Project - Two community-based projects are implementing creative and effective strategies to reduce the burden of diabetes. Each project has developed a local plan based on a community needs assessment guided by the CDC's **Diabetes Today** approach. Local project contact information:

☎ 757- 787-3532 or 540-386-1312

☞ www.vahealth.org/diabetes

Friendship Cafes: Senior Connections, provides a lunchtime meal and educational materials on nutrition, exercise and medication management. The cafes also offer exercise programs and various health screenings.

☎ (804) 343-3025 or (804) 343-3026

☞ <http://www.seniorconnections-va.org/seniors/nutrition.htm>

Lift Every Voice: Diabetes Project of the Urban League of Greater Richmond, in partnership with the Medical College of Virginia. This program provides nutritional education on diabetes to older adults. Developed diabetes resource guide and training materials.

☎ 1-804-649-8407

☞ www.urbanleaguerichmond.org

Meals on Wheels: A program that prepares and delivers regular hot meals to the elderly and individuals with disabilities who are unable to shop for and/or prepare the food for themselves.

☎ 1-800-677-1113

☞ <http://mealcall.org/meals-on-wheels/va/>

add
HDM → VDA
contact

Physical Activity

American Academy of Orthopedic Surgeons – ask for free publications on how to exercise safely.

☞ www.aaos.org

Expand description

Cardiac Wellness Program for Medicare Patients with Heart Disease – Bon Secours Richmond St. Mary's Hospital. Evidence-based program affiliated with the Mind/Body Medical Institute, Harvard Medical School. St. Mary's is one of six national sites.

- 12 month program that includes moderate exercise, heart healthy dietary recommendations, and stress management

DRAFT

HEALTHY VIRGINIANS

- Eligibility requirements: have heart disease, have Medicare Part B, interested in making healthy lifestyle changes, live within 90 minutes of St. Mary's Hospital.
- No charge

☎ Contact Sherri Strickler, RN 804-287-7155

💻 www.bonsecours.com

Healing Zone Project - The Healing Zone Project National Caucus and Center on Black Aged, Inc. is a faith-based, community health promotion program especially designed for African American older adults, 55 years+. The goal of the Project is to increase awareness of overweight and obesity, and encourage seniors to get active and stay healthy.

Senior Connections-Capitol AAA

Richmond, VA 23219-3796

☎ (804) 343 – 3000

💻 www.ncba-aged.org

PACE (People with Arthritis Can Exercise) – is an exercise program specifically for people with arthritis that uses gentle activities to help increase joint flexibility, range of motion, overall stamina and to help maintain muscle strength.

💻 http://www.arthritis.org/communities/chapters/VA/Wellness_Partners/default.asp

The Joy Program: AARP, American Heart Association and Bon Secours Richmond Health System. A faith-based program that aids in reducing disparities in cardiovascular disease among African Americans. The meetings are structured to include hands on experience with healthy eating, information on physical activity and an opportunity for a 45-minute workout.

☎ (804) 225-1791

Smoking

American Cancer Society -Tobacco and Cancer – If you or someone you love uses tobacco, here's what you need to know about how tobacco kills, and how to get the help you need to quit.

☎ 1-800-ACS-2345

💻 <http://www.cancer.org>

Smoke Free Virginia - Website designed to provide residents of Virginia about smoking cessation programs offered in their communities along with links to other web sites that offer additional information and assistance to those thinking about quitting now.

💻 www.smokefreevirginia.org



Useful Links

AARP – www.aarp-org/activeforlife

☎ 1-800-424-3410

Active Aging Partnership - www.agingblueprint.org

Administration on Aging - www.aoa.gov

American Cancer Society – www.cancer.org

☎ 1-800-ACS-2345

American Heart Association – www.americanheart.org

☎ 1-800-242-8721

American Lung Association of Virginia – www.lungusa.org

☎ 1-800-Lungusa

Centers for Disease Control and Prevention - www.cdc.gov

Food and Drug Administration, Dept. of Health and Human Services – www.fda.gov

☎ 1-888-INFO-FDA (1-888-463-6332)

Geriatrics and Aging - www.cannylink.com/healthaged.htm

Health Finder - www.healthfinder.gov

Healthy People 2010 - www.healthypeople.gov/BeHealthy

Institute on Aging at the University of Virginia - www.virginia.edu/aginginstitute/support.html

Jewish Community Center – www.icca.org

Statewide programs on exercise and physical activity for older adults.

National Blueprint - www.agingblueprint.org

Increasing physical activity among adults age 50 and older

National Governors' Association – A Lifetime of Health and Dignity - www.subnet.nga.org

National Institute on Aging - www.nia.nih.gov/

AgePage - Good Nutrition; It's A Way of Life - call or write to receive free publications about health and fitness for older adults

☎ 1-800-222-2225

Nutrition - www.nutrition.gov

DRAFT

HEALTHY VIRGINIANS



President's Council on Fitness and Sports - www.fitness.gov

Senior Navigator – www.seniornavigator.com/

Where community and technology come together, Virginia's award winning website for seniors and those who care about them.

Virginia Cooperative Extension - www.ext.vt.edu

Virginia Department of Health - www.vdh.state.va.us

Virginia Department For The Aging - ~~www.aging.state.va.us~~ www.vda.virginia.gov
Provides links to local services.

YMCA/YWCA – www.ymca.org

Services vary from location to location; many offer exercise programs for older adults, including endurance exercises, strength exercises, water exercises and walking. Check your phonebook for a local listing.